

Aetna Choice® POS II (Out-of-State Plan)

Supplemental Information

How is the overall deductible or out-of-pocket limit met?

This **plan** has a separate **deductible** and **out-of-pocket limit** for individuals and families.

Once the family **deductible** or **out-of-pocket limit** is met, all family members will be considered as having met their **deductible** or **out-of-pocket limit**. There is no individual **deductible** or **out-of-pocket limit** to satisfy within the family **deductible** or **out-of-pocket limit**.

Coverage for: Individual + Family | Plan Type: POS

How your out-of-network care is reimbursed:

We cover the cost of services based on whether doctors are "in-network" or "out-of-network." We want to help you understand how much Aetna pays for your out-of-network care and help you understand how much you will need to pay.

You may choose a **provider** (doctor or hospital) in our **network**. You may choose to visit an out-of-network **provider**. If you choose a **provider** who is out-of-network, your Aetna health **plan** may pay some of that **provider's** bill. Most of the time, you will pay a lot more money out of your own pocket if you choose to use an out-of-network **provider**.

When you choose out-of-network care, Aetna limits the amount it will pay. This limit is called the "recognized" or "allowed" amount. This amount is based on the out-of-network plan you or your employer has chosen.

Professional Services: Prevailing Charges

Facility Services: Prevailing Charges

To learn more about how we pay out-of-network benefits, carefully review your plan documents or visit Aetna.com and type "how Aetna pays" in the search box.

Your provider sets their own rate to charge you. It may be higher -- sometimes much higher -- than what your Aetna plan "recognizes." Your provider may bill you for the dollar amount that the plan doesn't "recognize." You must also pay any copayments, coinsurance and deductibles under your plan. Your payments for the charges above the "recognized charge" do not count toward your deductible or out-of-pocket limit.

You can avoid these extra costs by getting your care from Aetna's broad network of health care providers. Go to www.aetna.com and click on "Find a Doctor" on the left side of the page. If you are already a member, sign on to your Aetna Navigator® member site.

This applies when you *choose* to get care out-of-network. When you have no choice (for example: emergency room visit after a car accident, or for other **emergency services**), we will pay the bill as if you got care in-network. You pay cost sharing and **deductibles** for your in-network level of benefits. Contact Aetna if your **provider** asks you to pay more. You are not responsible for any outstanding **balance billed** by your **providers** for **emergency services** beyond your cost sharing and **deductibles**.

Other important information about your plan:

This plan does not cover all health care expenses and includes exclusions and limitations. Members should refer to their plan documents to determine which health care services are covered and to what extent.

Additional information regarding your plan is available in the Disclosure Document on aetna.com

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Information includes:

- "Knowing what is covered" which describes how we review a request for coverage for a service or supply
- "Prescription drug benefit" which describes procedures we use to manage prescription drug benefits. These procedures include how to obtain a list of covered drugs and the exception policy for receiving coverage of a drug that is not on a closed formulary

Health benefits and health insurance plans contain exclusions and limitations. Not all health services are covered.

See plan documents for a complete description of benefits, exclusions, limitations and conditions of coverage. Plan features and availability may vary by location and are subject to change. You may be responsible for the health care provider's full charges for any non-covered services, including circumstances where you have exceeded a benefit limit contained in the plan. Providers are independent contractors and are not agents of Aetna. Provider participation may change without notice. We do not provide care or guarantee access to health services.

The following is a partial list of services and supplies that are generally not covered. However, your plan documents may contain exceptions to this list based on state mandates or the plan design or rider(s) purchased by your employer.

- All medical and hospital services not specifically covered in, or which are limited or excluded by your plan documents
- Donor egg retrieval
- Experimental and investigational procedures, except for coverage for medically necessary
 routine patient care costs for members participating in a cancer clinical trial
- Home births
- Immunizations for travel or work except where medically necessary or indicated
- Implantable drugs and certain injectable drugs including injectable infertility drugs
- Long-term rehabilitation therapy
- Non-medically necessary services or supplies

- Orthotics except diabetic orthotics
- Outpatient prescription drugs (except for treatment of diabetes), unless covered by a prescription plan rider and over-the-counter medications (except as provided in a hospital) and supplies

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- Radial keratotomy or related procedures
- Reversal of sterilization
- Services for the treatment of sexual dysfunction or inadequacies, including therapy, supplies or counseling or prescription drugs
- Therapy or rehabilitation other than those listed as covered
- Treatment of behavioral disorders

Aetna receives rebates from drug manufacturers that may be taken into account in determining Aetna's Preferred Drug List. Rebates do not reduce the amount a member pays the pharmacy for covered prescriptions. Aetna Rx Home Delivery refers to Aetna Rx Home Delivery, LLC, a licensed pharmacy subsidiary of Aetna Inc., that operates through mail order. The charges that Aetna negotiates with Aetna Rx Home Delivery may be higher than the cost they pay for the drugs and the cost of the mail order pharmacy services they provide. For these purposes, the pharmacy's cost of purchasing drugs takes into account discounts, credits and other amounts they may receive from wholesalers, manufacturers, suppliers and distributors.



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In case of emergency, call 911 or your local emergency hotline, or go directly to an emergency care facility.

We consider your personal information to be private. We have policies and procedures in place to protect your personal information from unlawful use and disclosure. For a summary of our policy, go to www.aetna.com. You'll find the Privacy Notices link at the bottom of the page.

Plan features and availability may vary by location and group size.

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